200 INTERNAL TRANSFER	REQUEST FOR S	S.N. 10/068444 USPIC
DATE: 6/17/02	FROM:	CAO (print name)
FORWARD TO: A. Art Unit: 2/3( B. Class: 7/3 C Subclass: 150† FURTHER EXPLANATION IF NEE Securit	REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):  DED:	(check box) (check box)
DATE:	FROM:	(print rame)
FORWARD TO: A. Art Unit: B. Class: C Subclass: FURTHER EXPLANATION IF NEE	REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):	(check box) (check box)
DATE:	FROM:	(print name)
FORWARD TO CLASSIFIER	REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s):	(check box) (check box)
FURTHER EXPLANATION IF NEED TO SERVICE DISPOSITION BY 2700 CLA		
DATE:	CLASSIFIER:	•
FORWARD TO: A. Art Unit: B. Class:	REASON(S): A. You had Parent B. See Title C. See Abstract	(check box) (check box)

FURTHER EXPLANATION IF NEEDED: